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from WILLIAM A. JIVIDEN

November 7, 2005

Direct: 937-449-6448 / Fax: 937-223-0724 / william.jividen@dinslaw.com

To:

Examiner Kien T. Nguyen

Firm:

MAIL STOP AMENDMENT

Fax Number:

571/273-8300

Client Number:

KEL 0124 PA/40415.129

Pages:

21

(including cover)

Comments:

OFFICIAL

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Applicants Serial No. : Everett et al. : 10/089,777

Filed

: June 18, 2002

Title

: IMPROVEMENTS RELATING TO ACTIVITY

SURFACES

Art Unit

: 3714

Conf. No.

: 2615

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PTO/SB/17 (12-04)

Approved for use through 07/31/2006, OMB 0651-0032

U.S. Patant and Tradomark Office; U.S. DEPARTMENT OF COMMERCE
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Effecti	tive on 12/08/2004.		Complete If Known									
Fees pursuant to the Consolida	ated Appropria	ations Act. 2005 (H.R. 4818).	Application Number	7								
I FEE TR	Filing Date	June 18, 2002										
For FY 2005			First Named Inventor Robert Everett									
			Examiner Name Kien T. Nguyen									
✓ Applicant claims small	entity status	s, See 37 CFR 1.27	Art Unit	3714								
TOTAL AMOUNT OF PAY	MENT (\$)	800.00	Attorney Docket No.	KEL 0124	PA		ر					
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify)!												
Deposit Account Deposit Account Number: Deposit Account Name:												
		account, the Director is he	reby authorized to: (chec	k all that ap	ply)							
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
FEE CALCULATION												
1. BASIC FILING, SEAF				T!Ob								
	FILING	FEES SEAR Small Entity	RCH FEES EXA Small Entity	10iTANIM <u>Item</u> e	Entity							
Application Type	Fee (\$)	Fee (\$) Fee (\$	<u>Fee (\$)</u>	(\$) <u>Fee</u>	(\$)	Fees Pald (\$)						
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Design	200	100 100	50 13	0 6	5 _		-					
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Reissue	300	150 500	250 60	0 30	0 -	_	-					
Provisional	200	100 0	0	0	0 –		_					
2. EXCESS CLAIM FEE	S				•	<u>Small</u> Fee (\$) Fee	Entity (\$)					
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Each independent claim	over 3 or, f	or Reissues, each indep	endent claim more the	in in the o	iginal patent	200 10	00					
Multiple dependent claim	15					360 I	80					
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HP = highest number of total	claims paid fo	r, If grester than 20		عامري	1001010	<u> </u>						
indep. Claims	Extra Claim	6 Fee (\$) Fee	Pald (\$)			_						
16 - 3 or HP = HP = highest number of Indep	endent claims		00.00									
3 APPLICATION SIZE	FFF					4.						
If the specification and	drawings	exceed 100 sheets of pa	aper, the application si	ze fee due	is \$250 (\$12:	5 for small er	itity)					
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sheets Number of each additional 50 or fraction themeof Fee (\$) Fee Paid (5)												
B B. L.I. IAN												
4. OTHER FEE(8) Non-English Specification, \$130 fee (no small entity discount)												
Other:												
SUBMITTED BY	(\leftarrow)	· ·	Registration No. 42,69	5	Telephone (c	37) 449-640	0					
(Allottie)//Agost												
Name (Print/Type) William A	L Jacden	/			Date 11/07/	2005						

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of three you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patient and Tradamark Office, U.S. Dependment of Commerce, P.O. Bex 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, cell 1-800-PTO-9199 end select option 2.

② 003/021

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PTC/SB/17 (12-04)
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Effective on 12/08/2004.						plete If Kno	WTI					
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).				Application Nu	1100.	89,777						
FEE TRANSMITTAL For FY 2005				Filing Date	June	June 18, 2002						
				First Named In	ventor Rob	Robert Everett						
				Examber Nam	e Kien	Kien T. Nguyen						
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	Art Unit 3714							
TOTAL AMOUNT OF	PAYMENT	(\$) 800	.00	Attorney Docks	t No. KEL	.0124 PA						
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order Other (please identify):												
Deposit Account Depoalt Account Number: Deposit Account Name:												
For the above	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
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Information and author	ization on PTO-2	038.										
FEE CALCULATION			AN SEED					-				
1. BASIC FILING,	SEARCH, AN	D EXAMINAT G FEES	ION FEES SEAF	CH FEES	EXAMINA	ATION FEES						
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Application Type			<u>Fee (</u> 3		<u>Fee (\$)</u> 200	Eee (\$) 100						
Utility	300	150	500	250	130	65						
Design	200	100	100	50			-					
Plant	200	100	300	150	160	80						
Reissuc	300	150	500	250	600	300	•					
Provisional	200	100	0	0	0	0		mall Entity				
2. EXCESS CLAIN Fee Description	W FEES						<u>Fee (\$) 2</u>	Fco (\$)				
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Each independent of	laim over 3 or	r, for Reissues	, each indep	endent claim n	nore than in	the original	patent 200 360	100 180				
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3. APPLICATION	SIZE FEE				, , ,	a dua la COS	\ (E124 for	all antitud				
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for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (3) Fee Paid (5)												
		/50 =		(round up to a	whole numb	er) x	=					
4. OTHER FEE(S)							Fee	9 Paid (\$)				
Non-English Specification, \$130 fee (no small entity discount)												
Other:												
	7-											
SUBMITTED BY	7 6) , 		Registration No	42,695	Teleph	one (937) 449	8400				
Signature				(Attomey/Agent)	Date 11/07/2005							
Name (Print/Type) Wil	lliam A. Judei	\ /				Date	1 1/07/2003					

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